

STUDENT INTERN PROGRAMS INFORMATION REQUEST FORM

NA	AME:			
1.	Do you have a family member who is an em	nployee of Sandia Nat	ional Laboratories (California or New Mexico)?	
lf y	yes , please list the name(s) and your relations	ship to the employee	(s) (e.g. mother, father, sister, brother, spouse, etc.):
	Name of Employe	e	Relationship	
2.	I am attending		egree (BS/BA, MS/MBA, and Ph.D.) with a major in	
	Expected graduation date:	(di		
3.	Select the current level of academic study you are actively pursuing:			
	High O Freshman Year Sophomore Year Junior Year Senior Year High School Graduate	College Associate's Bachelor's Freshman Year Sophomore Yea Junior Year Senior Year	☐ Dual Degree ☐ Master's Student ☐ Ph.D. Student ☐ Ph.D. ABD Student (has completed all couexams and has been advanced to candidate	
4.	Please indicate your shirt size:			

*Advisor verification is required to confirm the student has completed all coursework, exams and has been advanced to candidacy.